ISSN: 2322 - 0902 (P)
ISSN: 2322 - 0910 (O)

International Journal of Ayurveda and Pharma Research

Case Study

EFFICACY OF *VIRECHANA KARMA* IN *GAMBHEER VATARAKTA* WSR TO PSORIATIC ARTHRITIS

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Article info

Article History:
Received: 18-04-2025
Accepted: 22-05-2025
Published: 15-06-2025

KEYWORDS:
Gambheer Vatarakta, Virechana, Panchakarma, Psoriatic Arthritis.

ABSTRACT

Gambheer Vatarakta, a severe manifestation of *Vatarakta*, a condition where there is an imbalance of the *Vata* and *Rakta doshas*. *Gambheer Vatarakta* is characterized by *Syavthu*, *Stabdhata, Arti, Shyava-tamra Twaka, Daha, Toda, Sphurana, Paka* in joints, resembling the symptoms observed in psoriatic arthritis. The term *Gambheer* translates to severe or profound reflecting the intensity of the condition. **Aim:** The study seeks to evaluate the impact of *Virechana Karma* in *Gambheer Vatarakta* with special reference to psoriatic arthritis, symptoms including pain, swelling, and joint function, as well as its influence on the overall inflammatory and *Dosha* balance. **Methods:** A detailed case study was conducted on a 26-year-old female patient diagnosed with *Gambheer Vatarakta*. The patient underwent with a procedure of *Virechana Karma*, following a preparatory phase of *Snehana* (oleation) and *Swedana* (sudation). Clinical assessments were performed before and after the treatment regimen, including detailed symptom evaluations and laboratory tests to monitor changes in inflammatory markers and *Dosha* imbalances. **Results:** The *Virechana Karma* resulted in significant reduction in joint pain, swelling, and skin lesions. The patient experienced improved joint mobility and overall functional capacity. Laboratory tests showed a notable decrease and more balanced *Dosha* levels. The patient reported decreased severity of psoriatic symptoms, indicating an improvement in both the arthritic and psoriatic components of the condition. **Conclusion:** This case study demonstrates that *Virechana Karma* can be an effective treatment for managing *Gambheer Vatarakta* in context of psoriatic arthritis. The therapeutic purgation led to significant relief and improved functional outcomes. The study supports integration of *Virechana Karma* in treatment protocols for complex cases involving chronic inflammatory arthritis and suggests further research to confirm its broader efficacy and potential benefits.

INTRODUCTION

Gambheer Vatarakta, a severe manifestation of *Vatarakta*, a condition where there is an imbalance of *Vata* and *Rakta doshas*. *Gambheer Vatarakta* is characterized by *Syavthu, Stabdhata, Arti, Shyava-Tamra-Twaka, Daha, Toda, Sphurana, Paka* in joints, resembling the symptoms observed in psoriatic arthritis. Psoriatic Arthritis (PsA) is inflammatory in nature that characteristically occurs in people with psoriasis.

Access this article online

Quick Response Code

https://doi.org/10.47070/ijapr.v13i5.3675

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Prevalence of PsA ranges from 5 to 10%.

A detailed case study was conducted on a 26-year-old female patient diagnosed with Gambheer *Vatarakta*. Psoriatic arthritis can be managed with the line of treatment of *Gambheer Vatarakta* due to the resemblance of its signs and symptoms. *Panchakarma* is prime modality to treat *Vatarakta*. So, patient underwent with a procedure of *Virechana Karma*. Clinical assessment was performed before and after treatment regimen.

Patient Description

- Name: Xyz
- Age: 26yrs
- Gender: Female
- Address: Gohati, Assam

- Occupation: Software Engineer
- Religion- Hindu
- Marital Status: Unmarried
- DOA: 9/11/2024
- DOD: 24/11/2024

Present Complaints

A 26year old female came to Panchakarma OPD No. 4, Patanjali Bhartiya Ayurvigyan Evum Anusandhana Sansathana, Haridwar, and presented with complaints of severe pain in all major and minor joints specifically in b/l hands and knee joints with recurrent flaky, scaly lesions over whole body including scalp since 5yrs.

Family History: There was no history of DM/HTN/TB

Personal history of patient

Appetite	Decreased
Bowel	1 time/day
Sleep	Disturbed
Micturition	5-6 times/day
Addiction	None
Food habit	Increased intake of *Guru* & *Abhisyandhi ahar* (fish/egg)
Past drug history	Took antibiotics and steroids for 4yrs
Menstrual history	LMP- 02-11-2024 Flow- Regular

Clinical Findings

On Physical Examination

- It revealed flat, pinkish-red colour rough-dry-thick silvery scaly lesions on erythematous base over abdomen bilateral lower and upper limb and scalp.
- Auspitz and candle grease sign were positive.
- CASPAR criteria (psoriasis, RA negative, arthritis symptoms in the distal interphalangeal articulations hand) of were assessed.
- Swelling over metacarpal joints were prominent.
- Big toe of right leg was inflamed with oedema.

On Systemic Examination: No abnormality was detected.

As Per *Ashtavidha Pariksha*

- *Nadi*: 78 bpm
- *Mutra*: 5-6 times/day
- *Mala*: 1 time/day
- *Jivha: Saam*
- *Shabdha: Khara*
- *Sparsha: Ushana*
- *Druk: Prakrit*
- *Akrutti: Madhyama*

Dasha Vidha Pariksha

- *Prakruti-Vata pitta*
- *Vikruti - Vata, Rakta*
- *Sara - Madhyama*
- *Satva - Madhyama*
- *Samhanana – Madhyama*
- *Satmya – Sarva rasa satmya*
- *Ahara shakti: Abhyavarana shakthi – Avara*
  Jarana shakthi – Avara
- *Vyayama- Avara*
- *Pramana- Madhyama*
- *Vaya – Madhyama*

Subjective Criteria

The CASPAR criteria are used for diagnosing psoriatic arthritis (PsA). It consists of the following features:

Criteria	Details in This Case	Score
Psoriasis (current or history)	Family history of psoriasis	1
Psoriatic nail dystrophy	Present (nail pitting, onycholysis)	1
Negative rheumatoid factor (RF)	RF test negative	1
Dactylitis (sausage-like digits)	History of dactylitis in fingers	1
Radiographic evidence	Juxta-articular new bone formation	1

Additional Diagnostic Markers & Assessments

Diagnostic Test	Findings in This Case
Erythrocyte Sedimentation Rate (ESR)	Elevated (indicating inflammation)
C-Reactive Protein (CRP)	Increased (marker of systemic inflammation)
MRI of joints	Synovitis and tenosynovitis observed
Dermoscopy of psoriatic lesions	Typical psoriatic changes (vascular patterns)

Objective Criteria

Serum uric acid, random blood sugar, RA factor And ASO Titre, CRP, ESR

Treatment Plan

Poorva karma

Langhana and *Deepana – Pachana* with *Chitrakadi Vati* is given till the *Niram Lakshna. Abhyantara Snehapana* was carried out by *Panchatikta Ghrita* in increasing dose starting from 30ml.

Pradhana karma

After proper *Snehana – Swedana*, patients will be administered with *Virechana Yoga* on empty stomach. *Trivrit Avleha* and *Draksha Kashaya* with a minimum dose of 80gm and 160ml will be given. *Virechana yoga* with sufficient quantity of *Ushnajala* as *Anupana* was given to the patients in the morning hours in between 9:30–10:00 AM. Then *Shuddhi Lakshana* in terms of *Laingiki, Vaigiki, Antiki,* and *Manki* were assessed.

Paschat karma

The time period in between the completion of *Vegas* to intake of normal diet special food is designed known as *Paschat karma.* Mainly its duration depends upon the type of *Shuddhi* done during the procedure. After the successful completion of *Virechana*, the patient was asked to follow all the precautions related to *Virechana*. *Samsarjana Krama* for 7days was given as per type of *Shuddhi Lakshana* and in sequence mentioned in classics.

Result of *Virechana*

- Total *Vega*- 22
- Type of *Shuddhi - Pravara Shudhi*
- *Antaki- Pittant*

Karma	**Days**	**Changes in Symptoms**
PTG oral intake (30ml)	Day 1	No change
PTG orally (60ml)	Day 2	Redness and itching increased.
PTG orally (90ml)	Day 3	Itching with scaling was prominent.
PTG orally (120ml)	Day4	Itching subsided slowly.
PTG orally (150ml)	Day 5	Flaky skin and joint pain decreased.
PTG orally (180ml)	Day 6	*Snighdhta* present
PTG orally (210ml)	Day 7	*Samyaka snighdha lakshana* present.
Abhyanga & Swedana	Day 8	Stiffness in joints was reduced.
Abhyanga & Swedana	Day 9	Movements of joints was more.
Abhyanga & Swedana	Day 10	Pain in joints reduced.
Virechana	Day 11	Got symptomatic relief.
Samsarjana Karma	Day 12th to 18th	Changes in investigations was seen.

Patient Assessment Before and After Treatment

Total study period was 15 days, and 3 months with medicine followed by 2-month follow-up without medicine. It was observed that almost 60% of his symptoms disappeared in 1 month and patient was free from complaints at the end of 3rd month. Lab investigations were repeated at the end of 3rd month and uric acid level was decreased from 8.6 to 6.4mg/dl. During follow-up patient was observed every 15 days for recurrence of symptoms. It was observed that symptoms do not recur during this period.

Before **After**

Sign and symptom	Before treatment	After treatment
Arti (pain)	3	1
Stabhdhata (stiffness)	3	0
Svathu (swelling)	3	1
Khara (roughness)	3	0
Vaivarnya (discoloration)	4	1
Kandu (itching)	3	0

DISCUSSION

Psoriatic Arthritis (PsA) is an inflammatory autoimmune condition that affects both the skin and joints, showing significant overlap with the Ayurvedic condition of *Gambheer Vatarakta.* According to Ayurveda, *Vatarakta* is caused by the vitiation of *Vata* and *Rakta*, leading to inflammatory changes, pain, and joint deformities. *Virechana Karma*, a bio-purification therapy, plays a crucial role in eliminating vitiated *Doshas*, particularly *Pitta* and *Rakta*, thereby addressing the pathology at its root.

In the present case study, *Virechana Karma* was administered to a patient diagnosed with Gambheer *Vatarakta* (psoriatic arthritis). The outcomes demonstrated significant relief in symptoms such as joint pain, swelling, stiffness, and skin manifestations. The detoxification process facilitated by *Virechana* helped in reducing systemic inflammation, improving joint mobility, and enhancing skin health.

The principles of Ayurveda suggest that *Srotoshodhana* (cleansing of bodily channels) through *Virechana Karma* removes *Avarana* (obstruction) of *Vata* by *Pitta* and *Kapha*, thereby restoring normal physiological functions. The improvement in the patient's symptoms aligns with these classical Ayurvedic principles, reinforcing the role of *Shodhana* therapy in chronic autoimmune disorders.

CONCLUSION

The present case study highlights the efficacy of *Virechana Karma* in managing *Gambheer Vatarakta* (psoriatic arthritis). Significant clinical improvement was observed post-therapy, indicating the role of bio-purification in reducing inflammation, alleviating pain, and enhancing overall health.

Virechana Karma, by addressing the root pathology of *Vatarakta*, offers a promising approach for managing autoimmune and inflammatory conditions like PsA. However, further clinical trials

with larger sample sizes are necessary to validate these findings and establish a standardized protocol for Ayurvedic management of psoriatic arthritis. Integrating Ayurveda with conventional management may provide a holistic approach to improving patient outcomes in autoimmune joint disorders.

Psoriatic Arthritis is a multifactorial systemic illness is one of the distressing, poorly understood and ill managed disease in modern science. So, this case study demonstrates that *Virechana Karma* can be an effective treatment for managing *Gambheer Vatarakta* in context of psoriatic arthritis. The therapeutic purgation led to significant relief and improved functional outcomes. The study supports integration of *Virechana Karma* in treatment protocols for complex cases involving chronic inflammatory arthritis and suggests further research to confirm its broader efficacy and potential benefits.

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Cite this article as:
Akansha Singh, Reshabh Sahu, Amit Tiwari. Efficacy of Virechana Karma in Gambheer Vatarakta wsr to Psoriatic Arthritis. International Journal of Ayurveda and Pharma Research. 2025;13(5):51-55.
https://doi.org/10.47070/ijapr.v13i5.3675
Source of support: Nil, Conflict of interest: None Declared

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